

Plant Name:

## **Louisville Metro Air Pollution Control District**

## Permit Application and Renewal Form AP-100N

## **Episode Action Plan**

Mail application to: 850 Barret Avenue Louisville, KY 40204

OR

e-mail to: airpermits@louisvilleky.gov

(502) 574-6000 FAX: (502) 574-5137 www.louisvilleky.gov/apcd

Plant ID:

| Date of submission:    |         |
|------------------------|---------|
|                        |         |
| Contact Information    |         |
| <b>Primary Contact</b> |         |
| Name:                  | Title:  |
| Office Telephone:      | e-mail: |
| Alternate Telephone:   |         |
| Alternate Contact #1   |         |
| Name:                  | Title:  |
| Office Telephone:      | e-mail: |
| Alternate Telephone:   |         |
| Alternate Contact #2   |         |
| Name:                  | Title:  |
| Office Telephone:      | e-mail: |
| Alternate Telephone:   |         |
|                        |         |

| Alert Level Episode Action Plan |            |                       |                                   |                              |                  |
|---------------------------------|------------|-----------------------|-----------------------------------|------------------------------|------------------|
| Emission<br>Point               | Pollutants | Description of Action | Resulting<br>Emissions<br>(lb/hr) | Emission<br>Reduction<br>(%) | Time<br>Required |
|                                 |            |                       |                                   |                              |                  |
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August 2011 Version 1.3

| Warning Level Episode Action Plan |            |                       |                                   |                              |                  |
|-----------------------------------|------------|-----------------------|-----------------------------------|------------------------------|------------------|
| Emission<br>Point                 | Pollutants | Description of Action | Resulting<br>Emissions<br>(lb/hr) | Emission<br>Reduction<br>(%) | Time<br>Required |
|                                   |            |                       |                                   |                              |                  |
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| Emergency Level Episode Action Plan |            |                       |                                   |                              |                  |
|-------------------------------------|------------|-----------------------|-----------------------------------|------------------------------|------------------|
| Emission<br>Point                   | Pollutants | Description of Action | Resulting<br>Emissions<br>(lb/hr) | Emission<br>Reduction<br>(%) | Time<br>Required |
|                                     |            |                       |                                   |                              |                  |
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## Instructions for Episode Action Plans Form AP-100N

As required by District Regulation 4.03, section 2.1 and 40 CFR 60, Subpart H and Appendix L, every affected source is required to submit an emergency episode plan.

Plant Name Enter the plant name exactly as it appears in Form AP-100A.

**Plant ID** This is the identification number assigned to the source by the District. If this

application is for a new source for which an ID has not been assigned, this space

may be left blank.

**Contact Information** Provide the information requested for a primary and two alternate contacts for

company officials who have authority to implement the action plans described on

this form.

**Alert Level Action Plan** Complete this form pursuant to District regulations 4.03, section 3; 4.04, section 1;

4.05, section 1; and 4.06, section 1.

Warning Level Action Plan Complete this form pursuant to District regulations 4.03, section 4; 4.04, section 2;

4.05, section 2; and 4.06, section 2.

**Emergency Level Action Plan** Complete this form pursuant to District regulations 4.03, section 5; 4.04, section 3;

4.05, section 3; and 4.06, section 3.

August 2011 Version 1.3